## Migraine treatment options



Type of treatment	Options	Up side and benefits	Down side
Lifestyle	keep a migraine diary.	<ul> <li>regular bed and wake up times,</li> <li>regular exercise and light meals.</li> <li>nuts and seeds (contain magnesium), whole grains and spinach.</li> <li>Fibre for breakfast.</li> </ul>	<ul> <li>avoid triggers:</li> <li>such as certain alcoholic drinks, chocolate, cheese, cured meats and caffeine.</li> </ul>
Supplements	Dummy pills (placebo)	Works in 25%	No harm
	Butterbur (supplements or fresh) 75mg x2 a day	works in 50% (placebo works in 25%)	<ul><li>might cause side effects.</li><li>Avoid in pregnancy</li><li>and with certain medications.</li></ul>
	Riboflavin 25- 400mg daily.	Said to help 1 in 2	<ul><li>urine may turn orange or red,</li><li>diarrhoea</li></ul>
	Coenzyme Q10 100mg x3 a day.	Helps 1 in 3.	might cause mild side effects
Alternative treatments	Acupuncture	10% better than placebo (35-60% benefit)	<ul><li>side effects are rare</li><li>10 sessions in 5-8 weeks</li></ul>
Medication	Do not use high dose aspirin (more than 75mg) in pregnancy, or ibuprofen or naproxen after 24 weeks.		
Over the counter options	Aspirin 900mg crushed or chewed	NNT 8	Not if you have a stomach ulcer. Rarely (10%) can trigger asthma.
	Ibuprofen 600mg crushed or chewed	NNT 7 or better	
	Naproxen 500mg crushed or chewed	•	
	Paracetamol 1g (2 tablets crushed or chewed)	A good low risk choice for mild migraines. NNT 12	Less effective than aspirin, ibuprofen or naproxen. Medication overuse headaches if using daily for any headache
Prescription only  Only 10-20% fail to respond to up to 3 courses of (different) triptans. If a triptan does not work reconsider the diagnosis.	Triptans	The most cost effective triptan eg sumatriptan 50-100mg (NNT 4-6) or zolmitriptan 2.5mg (also orodispersible). Buccal or sublingual if vomiting. Repeat after 2 hours if necessary. No more than 2 doses in 24 hours.  Can be used in combination with Aspirin or Ibuprofen or Naproxen.  Non-oral triptans should be considered if vomiting is problematic. e.g. sumatriptan suppositories. Intranasal zolmitriptan (5 mg) may be a better option as about 30% of the drug is absorbed through the nose.	Tend to be drowsy afterwards. Can trigger medication over-use headaches, especially if used more often than twice a week. Nasal sumatriptan (20 mg) is not recommended if there is vomiting, as it is absorbed through the oral route.
Nausea medication	Consider domperidone for nausea 10mg tds for no longer than 1 week (also suppositories).	To allow oral medications to act and to settle nausea.	Dry mouth. Occasional tiredness You will need an ECG. Not suitable for over 60 years of age or with some other medications (drugs that inhibit CYP3A4 or prolong QT, check ECG for QTc.)
	Metoclopramide (no longer than 5 days) or prochlorperazine are alternatives.		Drowsiness and movement disorders